SERFF Tracking Number: XLAM-125388251 State: Arkansas State Tracking Number: Filing Company: EFT \$100 Greenwich Insurance Company

Company Tracking Number: 07GD-XL-PL02-MU-AR

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Product Name: Other Liability

Project Name/Number: Lawyers Professional Liability Rate Revision Filing/07GD-XL-PL02-MU-AR

Filing at a Glance

Company: Greenwich Insurance Company

Product Name: Other Liability SERFF Tr Num: XLAM-125388251 State: Arkansas

TOI: 17.0 Other Liability - Claims SERFF Status: Closed State Tr Num: EFT \$100

Made/Occurrence

Omissions Liability

Sub-TOI: 17.0019 Professional Errors & Co Tr Num: 07GD-XL-PL02-MU-AR State Status: Fees verified and

received

Co Status: Filing Type: Rate Reviewer(s): Betty Montesi, Edith

Roberts, Brittany Yielding

Author: Trish Pollard Disposition Date: 12/17/2007 Date Submitted: 12/14/2007 Disposition Status: Filed

Effective Date Requested (New): 03/01/2008 Effective Date (New): Effective Date Requested (Renewal): 03/01/2008 Effective Date (Renewal):

State Filing Description:

General Information

Project Name: Lawyers Professional Liability Rate Revision Filing Status of Filing in Domicile: Pending

Project Number: 07GD-XL-PL02-MU-AR **Domicile Status Comments:**

Reference Organization: Reference Number: Reference Title: Advisory Org. Circular:

Filing Status Changed: 12/17/2007 State Status Changed: 12/17/2007

Corresponding Filing Tracking Number:

Filing Description:

We are filing revisions to the applications and supplements

Company and Contact

Filing Contact Information

Created by SERFF on 12/17/2007 02:32 PM

Deemer Date:

Company Tracking Number: 07GD-XL-PL02-MU-AR

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Product Name: Other Liability

Project Name/Number: Lawyers Professional Liability Rate Revision Filing/07GD-XL-PL02-MU-AR

Patricia Pollard, Compliance Analyst patricia.pollard@xlai.com 1201 N. Market Street (302) 661-7010 [Phone] Wilmington, DE 19801 (302) 778-4190[FAX]

Filing Company Information

Greenwich Insurance Company CoCode: 22322 State of Domicile: Delaware

1201 North Market street Group Code: 1285 Company Type:

Suite 501

Wilmington, DE 19801 Group Name: State ID Number:

(866) 304-3079 ext. [Phone] FEIN Number: 95-1479095

Company Tracking Number: 07GD-XL-PL02-MU-AR

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Product Name: Other Liability

Project Name/Number: Lawyers Professional Liability Rate Revision Filing/07GD-XL-PL02-MU-AR

Filing Fees

Fee Required? Yes

Fee Amount: \$100.00

Retaliatory? No

Fee Explanation:

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Greenwich Insurance Company \$100.00 12/14/2007 17114508

Company Tracking Number: 07GD-XL-PL02-MU-AR

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Product Name: Other Liability

Project Name/Number: Lawyers Professional Liability Rate Revision Filing/07GD-XL-PL02-MU-AR

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Edith Roberts	12/17/2007	12/17/2007

Company Tracking Number: 07GD-XL-PL02-MU-AR

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Product Name: Other Liability

Project Name/Number: Lawyers Professional Liability Rate Revision Filing/07GD-XL-PL02-MU-AR

Disposition

Disposition Date: 12/17/2007

Effective Date (New): Effective Date (Renewal):

Status: Filed Comment:

Rate data does NOT apply to filing.

Company Tracking Number: 07GD-XL-PL02-MU-AR

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Product Name: Other Liability

Project Name/Number: Lawyers Professional Liability Rate Revision Filing/07GD-XL-PL02-MU-AR

Item Type	Item Name	Item Status	Public Access
Supporting Document Uniform Transmittal Document-Property &Filed		ty &Filed	No
0	Casualty		
Supporting Document	NAIC Loss Cost Filing Document for	Filed	No
5	OTHER than Workers' Comp		
Supporting Document	NAIC loss cost data entry document	Filed	No
Rate	Arkansas State Rate Page	Filed	No
Rate	Exhibits	Filed	No

Company Tracking Number: 07GD-XL-PL02-MU-AR

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Product Name: Other Liability

Project Name/Number: Lawyers Professional Liability Rate Revision Filing/07GD-XL-PL02-MU-AR

Rate Information

Rate data does NOT apply to filing.

Company Tracking Number: 07GD-XL-PL02-MU-AR

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Number:

Product Name: Other Liability

Project Name/Number: Lawyers Professional Liability Rate Revision Filing/07GD-XL-PL02-MU-AR

Rate/Rule Schedule

Review Status: Exhibit Name: Rule # or Page Rate Action Previous State Filing Attachments

Filed Arkansas State Rate 2007 Replacement AR Rate Pages

Page 2007.pdf

Filed Exhibits New GIC GL Est Inv

Earnings Exhibit

Lawyers.pdf

GREENWICH INSURANCE COMPANY ARKANSAS RATE PAGES

I. Base Rate:

Base Limits \$100,000/\$300,000	<u>Deductible</u> \$1,000	<u>Premium</u> Per Attorney
Territory No. 1: Pulaski County		\$1,000
Territory No. 2: All counties not listed above		\$ 750

II. Deductible Credit:

Deductible Amount	Damages an	Damages and Claim Expense	
	Per	_	
	Claim	Aggregate	
\$2,000	.04	.02	
\$5,000	.10	.04	
\$10,000	.15	.06	
\$15,000	.18	.09	
\$20,000	.20	.13	
\$25,000	.21	.18	
\$30,000	.23	.20	
\$50,000	.27	.24	
\$75,000	.33	.28	
\$100.000	.40	.35	

III. Area of Practice Rating Modification Factors:

Area of Practice	Factor	Area of Practice	Factor
Administrative Law	0.95	Guardianship/Juvenile	0.65
Admiralty Law	0.90	Immigration and Naturalization	0.65
Adoption Law	0.65	Insurance Defense	0.70
Antitrust/Trade Regulation	1.05	Intellectual Property	1.60
Arbitration/Mediation	0.75	(Patents, Copyrights & Trademark	s)
Bankruptcy	0.80	International Law	1.00
Business Transactions & Contracts	0.90	Labor-Management	1.00
Civil Rights and Discrimination	1.00	Labor-Union/Employee	1.05
Collection/Repossession	1.00	Local Government (not bonds)	0.65
Commercial Litigation-Plaintiff	1.00	Mass Torts/Class Actions	1.40
Commercial Litigation-Defense	0.85	Natural Resources (Oil and Gas)	1.05
Construction/Building Contracts	1.00	Personal Injury-Plaintiff	1.25
Consumer Claims	1.00	Personal Injury-Defendant	0.70
Corporate Administrative	0.85	Real Estate-Commercial	1.40
Corporate & Business Organization	0.85	Real Estate-Residential	1.20
Corporate Mergers and Acquisitions	1.05	Residential-Title/Abstracting	1.60
Criminal	0.60	Securities	1.60
Divorce w/Assets <= \$1M	0.65	Social Security	0.65
Divorce w/Assets > \$1M	1.10	Taxation	1.00
Environmental Law	1.05	Workers' Compensation-Defense	0.70
Entertainment	1.15	Workers' Compensation-Plaintiff	0.85
ERISA/Employee Benefits	1.40	Wills, Trusts, Estates < \$1M	0.65
Financial Institutions/Banking	1.10	Wills, Trusts, Estates \$1M-\$5M	1.00
Government Contracts and Claims	1.00	Wills, Trusts, Estates > \$5M	1.40
		Other	1.00

GREENWICH INSURANCE COMPANY ARKANSAS RATE PAGES

IV. Claims Made Maturity Factors

Years of Maturity	Rating Factor
1 st Year	1.00
2 nd Year	1.40
3 rd Year	1.60
4 th Year	1.80
5 th Year	2.00
6 th Year or more	2.20

V. ILF Factors

<u>Limits of Liability</u>	<u>DWL ILF</u>	DOL ILF
100/300	1.00	1.25
250/500	1.35	1.50
500/500	1.60	1.75
500/1M	1.77	1.92
1M/1M	1.87	2.02
1M/2M	2.07	2.22
1M/3M	2.16	2.31
2M/2M	2.38	2.55
2M/3M	2.43	2.60
2M/4M	2.51	2.64
3M/3M	2.72	2.86
4M/4M	2.99	3.14
5M/5M	3.22	3.38
6M/6M	3.39	
7M/7M	3.54	
8M/8M	3.65	
9M/9M	3.76	
10M/10M	3.85	

VI. Size of Firm Credit Factors

Number of Attorneys	Credit
First 5	0%
Next 25	30%
Over 30	45%

VII. Experience Rating Factors

Incurred	0-5	6-10	11-20	20+
Loss Ratio	<u>Attorneys</u>	<u>Attorneys</u>	<u>Attorneys</u>	<u>Attorneys</u>
0-25%	5.0% Credit	7.5% Credit	10.0% Credit	12.5% Credit
26-50%	0.0%	0.0%	0.0%	0.0%
51-75%	5.0% Debit	7.5% Debit	10.0% Debit	12.5% Debit
76-100%	7.5% Debit	10.0% Debit	12.5% Debit	15.0% Debit
Over 100%	10.0% Debit	12.5% Debit	15.0% Debit	20.0% Debit

GREENWICH INSURANCE COMPANY ARKANSAS RATE PAGES

VII. Other Individual Risk Rating Modifications

(All of the following rating factors are additive, while all of the above factors are multiplicative, except for the deductible credit which is subtracted from the increased limit factor)

A. Risk Management Rating Plan

Risk Management System	Credit	<u>Debit</u>
Docket Control/Conflicts/Procedural Systems	0-2.5%	0-2.5%
Client Intake Procedures/Client Relations	0-2.5%	0-2.5%
Internal Management/Training/Controls	0-2.5%	0-2.5%
Formal Policies and Procedures/		
Formal Risk Management Program	0-2.5%	0-2.5%

B. Scheduled Rating Plan

Scheduled Rating Plan Characteristic	<u>Credit</u>	<u>Debit</u>
Firm Structure, History and Financial Condition	0-10.0%	0-10.0%
Severity Exposure/Transaction or Case Size	0-10.0%	0-10.0%
Firm Experience/Credentials/Qualifications	0-10.0%	0-10.0%
Client Involvement/Number and Type of Clients	0-10.0%	0-10.0%
Specialization-Generalization/Caseload/Support	0-5.0%	0-5.0%

C. Continuing Legal Education Credits

Qualification	<u>Credit</u>	
Min. of 3.0 Credit Hours of CLE, primarily devoted to	2% Credit Per Attorney ur	

Min. of 3.0 Credit Hours of CLE, primarily devoted to 2% Credit Per Attorney, up Risk Management, Ethics or Malpractice Avoidance to a Maximum 10% per firm

Premium Adjustment

D. Renewal Credit

Qualification	Credit
Each initial renewal and uninterrupted renewal thereafter	3.75%

Each of the above characteristics are to be added together, then multiplied as a single factor against the other rating factors and the base rate. The maximum schedule rating modification is a 25% total debit or credit.

VIII. Optional Coverage

Type of Coverage

		(Debit/Credit)
A.	Career Coverage Endorsement	Per Attorney basis, up to 10% Debit per firm
B.	Extended Reporting Coverage	
	1 Year Term3 Year Term5 Year Term	100% of last annual Premium 185% of last annual Premium 225% of last annual Premium

Lawyers Professional Liability

Expense Exhibit

Commission & Brokerage	19.5%
Other Acquisition	2.0%
General Expense	10.0%
Taxes, Licenses, & Fees	3.0%
Profit & Contingencies*	6.6%
Total Expenses	41.1%
Expected Loss Ratio	58.9%

^{*} P&C factor includes provision for Investment Income.

XL Insurance Exhibit 3
Page 1 of 6

General Liability

Estimated Investment Earnings

A.	Unearned Premium Reserve 1. Estimated Ultimate Premium 2. Estimate Mean Unearned Premium Reserve 3. Deduction for Prepaid Expense Commission & Brokerage Taxes, License and Fees 3.00% 50% Other Acquisition 50% General Expense Total 4. (2) x (3) 5. Net Subject to Investment (2) - (4)	371,481,600 185,740,800 28.50% 52,936,128 132,804,672
В.	Delayed Remission of Premium (Agents' Balances) 1. Estimated Ultimate Premium 2. Average Agents' Balances (see attached exhibit) 3. Delayed Remission (1) x (2)	371,481,600 28.12% 104,454,190
C.	Loss Reserves 1. Estimated Ultimate Premium 2. Expected Incurred Loss and LAE Ratio 3. Expected Incurred Loss and LAE (1) * (2) 4. Mean Loss Reserve to Incurred Loss Ratio (see attached exhibit) 5. Expected Mean Loss Reserves (3) * (4)	371,481,600 58.9% 218,718,270 2.383 521,114,450
D.	Surplus 1. Surplus [P:S=1.5] * A(1) 2. Add Revenue for Risk Load 3. Risk Load Revenue	247,654,400 0 0
E.	Subject to Investment Income $A(6) - B(3) + C(5) + D(1)$	797,119,332
F.	Avg Rate of Return (see attached exhibit)	1.69%
G.	Investment Earnings F*E	13,481,595
H.	Avg ROR as % of EP BFIT G/ A(1)	3.63%
I.	Avg ROR as % of EP AFIT (Overall tax rate of 34.9% applied, see attached)	2.36%
J.	Required Total Return on Premium (see attached exhibit)	6.67%
K.	Indicated U/W Profit Provision J - I	4.30%
L.	Indicated Pre Tax U/W Profit Provision K/(1-0.35)	6.62%
M.	Selected Pre Tax U/W Profit Provision	6.62%

XL Insurance Exhibit 3
Page 2 of 6

XL Insurance Estimated Investment Earnings

Line A-2

The unearned premium reserve is 0.5 times the estimated ultimate premium due to the fact that these are all annual policies.

Line A-3

Deduction for prepaid expenses:

Production costs and a significant portion of other company expenses in connection with the writing and handling of insurance policies, exclusive of claim adjustment expenses, are incurred when the premium is written and before the premium is paid. These provisions were selected from the program experience.

Line B-2

Delayed Remission of Premium:

This deduction is necessary because of delay in collection and remission of premium to the companies beyond the initial effective date of their policies. Funds for the unearned premium reserve required during the initial days of most policies must be taken from the company's surplus.

The ratio is based on data from the Best's Aggregrates and Averages 2004 Edition.

1.	Net Earned Premium for Calendar Year 2003	175,619,203
2.	Net Agents' Balances as of 12/31/03	51,605,192
3.	Net Agents' Balances as of 12/31/02	47,156,963
4.	Mean Agents' Balances: $0.5 * [(2) + (3)]$	49,381,078
5.	Ratio (4) / (1)	28.12%

XL Insurance Exhibit 3
Page 3 of 6

General Liability

Estimated Investment Earnings

Line C-3

Expected Mean Loss Reserve

The expected mean loss reserve is determined by multiplying the expected incurred losses from C-2 by the average historical ratio of the mean loss and loss adjustment expenses to the incurred losses and loss adjustment expenses for the line of business. This ratio is based on line of business specific data and includes an adjustment for the estimated federal income taxes payable due to the discounting of loss reserves.

Industry

uy		
1.	Incurred losses and LAE for 2002	47,580,634
2.	Incurred losses and LAE for 2003	48,266,068
3.	Net Loss and LAE Reserves as of 12/31/2001	106,098,970
4.	Net Loss and LAE Reserves as of 12/31/2002	121,047,056
5.	Net Loss and LAE Reserves as of 12/31/2003	134,372,976
6.	Mean Loss Reserves 2000: 0.5 * [(3) + (4)]"	113,573,013
7.	Mean Loss Reserves 2001: $0.5 * [(3) + (4)]"$	127,710,016
8.	Ratio (6) / (1)	2.387
9.	Ratio (7) / (2)	2.646
10.	0.5 * [(8) + (9)]	2.516
11.	Estimated Reserve Discount	15.2%
12.	Federal Taxes Payable (% of reserves): (11) * 35%	5.3%
13.	(10) * [1.0 - (12)]	2.383
14.	Selected	2.383

Estimated Investment Earnings

Calculation of Total Rate of Return based on Greenwich Insurance Company Annual Statement.

Net Investment Income Earned

	Net Investment	Cash and	Mean Cash and	Rate of
Year	Income Earned	Invested Assets	Invested Assets	Return
2001	11,604,220	640,507,495		
2002	10,135,368	551,252,249	595,879,872	1.70%
2003	10,969,558	630,823,033	591,037,641	1.86%
<u>2004</u>	<u>16,741,408</u>	839,189,906	<u>735,006,470</u>	2.28%
Total	37,846,334	2,021,265,188	1,921,923,983	1.97%

Net Realized Capital Gains (Losses)

	Realized Capital	Cash and	Mean Cash and	Rate of
<u>Year</u>	Gains or Losses	Invested Assets	Invested Assets	Return
2001	1,726,855	640,507,495		
2002	15,990,652	551,252,249	595,879,872	2.68%
2003	5,526,194	630,823,033	591,037,641	0.93%
<u>2004</u>	<u>203,261</u>	839,189,906	<u>735,006,470</u>	0.03%
Total	21,720,107	2,021,265,188	1,921,923,983	1.13%

Net Unrealized Capital Gains (Losses)

	Unrealized Capital	Cash and	Mean Cash and	Rate of
<u>Year</u>	Gains or Losses	Invested Assets	Invested Assets	<u>Return</u>
2001	4,597,803	640,507,495		
2002	(7,422,351)	551,252,249	595,879,872	-1.25%
2003	(41,544,255)	630,823,033	591,037,641	-7.03%
<u>2004</u>	21,905,463	839,189,906	735,006,470	<u>2.98%</u>
Total	(27,061,143)	2,021,265,188	1,921,923,983	-1.41%

TOTAL Rate of Return: 1.69%

Estimated Investment Earnings

Line J

Calculation of After Tax Target Rate of Return

The Company has determined that an average after-tax return on equity of at least 10% is necessary to attract and retain investors. This target has been tested by using industry known Capital Assets Pricing Model, which determines the cost of equity capital that stock holders demand. The equation of the model is as follows:

 $KE = RF^1 + B(RM-RF^2)$

KE = cost of equity capital

RF¹ = risk free rate of return (10 year Treasury Note)

 RF^2 = risk free rate of return (25 year average)

B = Beta

RM = overall rate of return on stock market

A value of 4.49% has been selected for the RF¹. This is the yield on 10 year US Treasury Notes as of June 9, 2004.

A value of 8.07% has been selected for RF². This is the twenty-five year average (1979-2003) of annual yields on 10 year US Treasury Notes.

The B rating for XL Capital is 0.9 (Source: NYSE, 4/15/05)

A value of 14.23% has been selected for the RM, the overall rate of return on the stock market. This is the twenty-five year average (1979-2003) as measured by the S&P 500 Index.

Based on the selected parameters, a fair and reasonable cost of equity capital would be 10%. The selection of 10% is hence fair and reasonable.

where:

		$RF^{l} = 4.49\%$
KE =	4.5 + 0.9*(14.2-8.1)	$RF^2 = 8.07\%$
KE =	10.0%	B = 0.90
Selected =	10.0%	RM= 14.2%

Estimated Investment Earnings

Line I

The effective income tax rate on investment income is calculated as a weighted average of the effective tax rate on investments and the tax rate for capital gains, with the rates of return used as weights.

	Rate of	Federal Income
	<u>Return</u>	Tax Rate
Net Investment Income Earned	1.97%	34.9%
Net Realized Capital Gains	<u>1.13%</u>	<u>35.0%</u>
	3.10%	34.9%

The average rate of federal income tax is determined by applying appropriate tax rates to the distribution of investment income earned for the current year for XL Insurance America, Inc and Greenwich Insurance Company as in the 2004 Annual Statement

	Investment Income Earned	Federal Income <u>Tax Rate</u>
Bonds	16.256.000	25.00/
Taxable	16,256,980	35.0%
Non-Taxable*	<u>71,583</u>	<u>5.0%</u>
Total	16,328,563	34.9%
G. 1		
Stocks To all ##	0	14.00/
Taxable**	0	14.2%
Non-Taxable (affiliates)	<u>0</u>	<u>35.0%</u>
Total	0	0.0%
Mortgage Loans	0	35.0%
Real Estate	0	35.0%
Cash on Deposit	1,085,397	35.0%
Short-Term Investments	0	35.0%
All Other	<u>0</u>	<u>35.0%</u>
Total	1,085,397	35.0%
Grand Total	17,413,960	34.9%
Grand Total	17,413,700	54.770
Investment Deduction	672,552	35.0%
Net Inv. Inc. Earned	16,741,408	34.9%

^{*} Assumes 65% of the income on tax-exempt bonds is subject to proration; that is, 15% of that income is taxed at the full corporate tax rate of 35%. The applicable tax rate is thus 5% (.95 * .15 * .35 = .05)

^{** 30%} of the dividend income is added to the full corporate tax rate of 35%. Assume all of the dividend income on stocks is subject to proration; that is, 15% of the remaining 70% of dividend income is taxed at a rate of 35%. The applicable tax rate is thus 14.2% ((.30*.35)+(.7*.15*.35)=.142)

Company Tracking Number: 07GD-XL-PL02-MU-AR

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Product Name: Other Liability

Project Name/Number: Lawyers Professional Liability Rate Revision Filing/07GD-XL-PL02-MU-AR

Supporting Document Schedules

Review Status:

Satisfied -Name: Uniform Transmittal Document- Filed 12/17/2007

Property & Casualty

Comments: Attachment:

NAIC Transmittal-Rates.pdf

Review Status:

Bypassed -Name: NAIC Loss Cost Filing Document Filed 12/17/2007

for OTHER than Workers' Comp

Bypass Reason: N/A to this filing

Comments:

Review Status:

Bypassed -Name: NAIC loss cost data entry document Filed 12/17/2007

Bypass Reason: N/A to this filing

Comments:

Property & Casualty Transmittal Document

1.	1 . Reserved for Insurance Dept. Use Only		1	2. Insurance Department Use only							
				a. Date the filing is received:							
				b. Analyst:							
				c. Disposition:							
				d. Date of disposition of the filing:							
				e. Effective date of filing:							
				New Business							
					Renewa	al B	Susiness				
				f. State Filing #:							
				g. SERFF Filing #:							
				h. Subject Codes							
2	Group Name							Group	NAIC #		
ა.	XL America, Inc.								1285	NAIC#	
				1						0	
4.	Company Name(s)				Domicil	e	NAIC #		IN#	State #	
	Greenwich Insurance Company	У			DE		22322	95- 1479095			
								14	79095		
5.	Company Tracking Number			07GD->	(L-XP02-	-MU	J-AR				
	Company Tracking Number	ate Office	er(s)								
	ntact Info of Filer(s) or Corpor Name and address	Title		[include	toll-free	nur	mber] FAX #			mail	
Cor	ntact Info of Filer(s) or Corpor Name and address Patricia Pollard	Title Senior S		[include Teleph 302-661	toll-free none #s -7059	nur	mber]		Patricia.F	Pollard@xl	
Cor	ntact Info of Filer(s) or Corpor Name and address Patricia Pollard 1201 N. Market, Suite 501	Title Senior S Filings		[include	toll-free none #s -7059	nur	mber] FAX #			Pollard@xl	
Cor	ntact Info of Filer(s) or Corpor Name and address Patricia Pollard 1201 N. Market, Suite 501	Title Senior S		[include Teleph 302-661	toll-free none #s -7059	nur	mber] FAX #		Patricia.F	Pollard@xl	
Cor	ntact Info of Filer(s) or Corpor Name and address Patricia Pollard 1201 N. Market, Suite 501	Title Senior S Filings		[include Teleph 302-661	toll-free none #s -7059	nur	mber] FAX #		Patricia.F	Pollard@xl	
Cor	ntact Info of Filer(s) or Corpor Name and address Patricia Pollard 1201 N. Market, Suite 501	Title Senior S Filings		[include Teleph 302-661	toll-free none #s -7059	nur	mber] FAX #		Patricia.F	Pollard@xl	
Cor 6.	ntact Info of Filer(s) or Corpor Name and address Patricia Pollard 1201 N. Market, Suite 501 Wilmington, DE 19801	Title Senior S Filings		[include Teleph 302-661	toll-free none #s -7059	nur	mber] FAX #		Patricia.F	Pollard@xl	
Cor 6.	htact Info of Filer(s) or Corpor Name and address Patricia Pollard 1201 N. Market, Suite 501 Wilmington, DE 19801 Signature of authorized filer	Title Senior S Filings Analyst		[include Teleph 302-661 866-304	toll-free tone #s -7059 l-3079	nur	mber] FAX #		Patricia.F	Pollard@xl	
7. 8.	Name and address Patricia Pollard 1201 N. Market, Suite 501 Wilmington, DE 19801 Signature of authorized filer Please print name of authorized	Title Senior S Filings Analyst	State	[include Teleph 302-661 866-304	e toll-free none #s -7059 I-3079	302	mber] FAX # 2-778-4190		Patricia.F	Pollard@xl	
7. 8.	Name and address Patricia Pollard 1201 N. Market, Suite 501 Wilmington, DE 19801 Signature of authorized filer Please print name of authorized in information (see General In	Title Senior S Filings Analyst	State	[include Teleph 302-661 866-304	e toll-free none #s -7059 l-3079 Pollard ons of th	302	mber] FAX # 2-778-4190		Patricia.F	Pollard@xl	
7. 8. Filin 9.	Name and address Patricia Pollard 1201 N. Market, Suite 501 Wilmington, DE 19801 Signature of authorized filer Please print name of authorized	Title Senior S Filings Analyst d filer nstructions	State State State	[include Teleph 302-661 866-304 Patricia descripti	e toll-free none #s -7059 l-3079 Pollard ons of th	nur 302	mber] FAX # 2-778-4190		Patricia.F	Pollard@xl	
7. 8. Filin 9.	Name and address Patricia Pollard 1201 N. Market, Suite 501 Wilmington, DE 19801 Signature of authorized filer Please print name of authorized Type of Insurance (TOI)	Title Senior S Filings Analyst d filer nstructions	State State State	[include Teleph 302-661 866-304 Patricia descripti	Pollard ons of th	nur 302	mber] FAX # 2-778-4190		Patricia.F	Pollard@xl	
7. 8. Filin 9. 10.	Name and address Patricia Pollard 1201 N. Market, Suite 501 Wilmington, DE 19801 Signature of authorized filer Please print name of authorized Type of Insurance (TOI) Sub-Type of Insurance (Sub-State Specific Product code(sapplicable)[See State Specific Requirements)	Title Senior S Filings Analyst d filer nstructions -TOI) s) (if uirements]	s for Oth	[include Teleph 302-661 866-304 Patricia descripti ner Liabil fessiona	Pollard ons of th ity	anur 302	mber] FAX # 2-778-4190		Patricia.F	Pollard@xl	
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17. Reference Organization # & Title	
18. Company's Date of Filing	
19. Status of filing in domicile	☐ Not Filed ☐ Pending ☐ Authorized ☐ Disapproved
Property & Casual	ty Transmittal Document—
20. This filing transmittal is part of Compa	ny Tracking # 07GD-XL-XP03-MU-AR
21. Filing Description [This area can be use form text]	ed in lieu of a cover letter or filing memorandum and is free-
Program. This filing revises our previous filing (20, 2006.	itting rule revisions for it's Lawyers Professional Liability 06GD-XL-XP02-MU-AR-R approved effective September ts from \$6 million to \$10 million. Please see the attached n.
A corresponding form revision filing is being sub	omitted under our file number 07GD-XL-XP03-MU-AR-F
22. Filing Fees (Filer must provide check # a	and fee amount if applicable) calculated your filing fees, place that calculation below]
Check #: EFT Amount:	Aciociated your ming ices, place that calculation below]

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

***Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)